UNITED STATES DISTRICT COURT

for the

CHARLOTTE, NC

NESTERM District of MC Garles 10

Charlotte Division

Plaintiff(s)

(Write the full name of each plaintiff who is filing this complaint. If the names of all the plaintiffs cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

Defendant(s)

(Write the full name of each defendant who is being sued. If the names of all the defendants cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names. Do not include addresses here.)

Case No.

1:22-CV-86-MR

(to be filled in by the Clerk's Office)

COMPLAINT FOR VIOLATION OF CIVIL RIGHTS

(Prisoner Complaint)

NOTICE

Federal Rules of Civil Procedure 5.2 addresses the privacy and security concerns resulting from public access to electronic court files. Under this rule, papers filed with the court should not contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include only: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number.

Except as noted in this form, plaintiff need not send exhibits, affidavits, grievance or witness statements, or any other materials to the Clerk's Office with this complaint.

In order for your complaint to be filed, it must be accompanied by the filing fee or an application to proceed in forma pauperis.

The Parties to This Complaint I.

A. The Plaintiff(s)

В.

needed.	each plaintiff named in the complaint. Attach additional pages if LittleJohn Jontavius
Name	LITTLE JOHN JONTAVIUS
All other names by which	
you have been known:	Actorica
ID Number	1751749
Current Institution	5150 Western Ave
Address	Majornaphonostromon Foothills CI
	Movgantown NC 28655
The Defendant(s)	
individual, a government agency, an listed below are identical to those cothe person's job or title (if known) and	ach defendant named in the complaint, whether the defendant is an a organization, or a corporation. Make sure that the defendant(s) ontained in the above caption. For an individual defendant, include I check whether you are bringing this complaint against them in their ity, or both. Attach additional pages if needed.
Defendant No. 1	"A 1/2" = 22
Name	Nr. Goune
Job or Title (if known)	correctional Officer
Shield Number	
Employer	Foothills correctional
Address	5150 western Aue
	Morgantown NC 28655
	City State Zip Code
	Individual capacity Official capacity
D C 1 121 0	A
Defendant No. 2	Who Broads
Name	0 10000011
Job or Title (if known)	Correctioned Officer
Shield Number	BISA MILAS Jama MILA
Employer	STOP MOSTER I STATE
Address	roothills Correctional
	Mirgartow NC 28655 City State Zip Code
	Individual canacity Official canacity

		Defendant No. 3		
		Name	Mr. Beamish	
		Job or Title (if known)	Serseant	
		Shield Number	30.0	
		Employer	Foothills correctioned	
		Address	5180 western Aug	
	MOVERNADIAN NC 2865			
			City State Zip Code	
			Individual capacity Official capacity	
		Defendant No. 4		
		Name	Foothills correctional Institution	
٠		Job or Title (if known)	Prision	
		Shield Number		
Employer Foothill correctional		•		
		Address	Mos 5150 Western Aue	
			Morgondon NC 28655 City State Zip Code	
			Individual capacity Official capacity	
11.	Basis	for Jurisdiction		
	Under 42 U.S.C. § 1983, you may sue state or local officials for the "deprivation of any rights, privileges, or immunities secured by the Constitution and [federal laws]." Under <i>Bivens v. Six Unknown Named Agents of Federal Bureau of Narcotics</i> , 403 U.S. 388 (1971), you may sue federal officials for the violation of certain constitutional rights.			
	A.	Are you bringing suit against (check al	l that apply):	
		Federal officials (a Bivens claim))	
	State or local officials (a § 1983 claim)			
	B. Section 1983 allows claims alleging the "deprivation of any rights, privileges, or immunities secured by the Constitution and [federal laws]." 42 U.S.C. § 1983. If you are suing under section 1983, what federal constitutional or statutory right(s) do you claim is/are being violated by state or local officials?			
		Creating a Safe envi	iroment and begging the sufe	
	C.	Plaintiffs suing under <i>Bivens</i> may only	y recover for the violation of certain constitutional rights. If you ional right(s) do you claim is/are being violated by federal	

C. What date and approximate time did the events giving rise to your claim(s) occur?

D. What are the facts underlying your claim(s)? (For example: What happened to you? Who did what? Was anyone else involved? Who else saw what happened?)
Co young took me to the Shower a shower that was over-flooded and I told him to put me in a nother, shower, Mr. Borsotti took me from the shower and allowed me to fall and did not attempt to keep me I slipped in a big Public of water

V. Injuries

If you sustained injuries related to the events alleged above, describe your injuries and state what medical

treatment, if any, you required and did or did not receive.

I hurt my back which in fact is still a on going Problem. My bower back to be exact

VI. Relief

State briefly what you want the court to do for you. Make no legal arguments. Do not cite any cases or statutes. If requesting money damages, include the amounts of any actual damages and/or punitive damages claimed for the acts alleged. Explain the basis for these claims.

to help ge ant for my injuries chuse the doctors and and the proper Medical services Hnd Im in TO THE WAY TO SEE THE SECOND S

Im requesting for 3.5 million to 5 million & dollars.

VII. Exhaustion of Administrative Remedies Administrative Procedures

The Prison Litigation Reform Act ("PLRA"), 42 U.S.C. § 1997e(a), requires that "[n]o action shall be brought with respect to prison conditions under section 1983 of this title, or any other Federal law, by a prisoner confined in any jail, prison, or other correctional facility until such administrative remedies as are available are exhausted."

Administrative remedies are also known as grievance procedures. Your case may be dismissed if you have not exhausted your administrative remedies.

A.	Did your claim(s) arise while you were confined in a jail, prison, or other correctional facility?
	Yes
	□ No
	If yes, name the jail, prison, or other correctional facility where you were confined at the time of the events giving rise to your claim(s).
	Foothills Correctional institution
В.	Does the jail, prison, or other correctional facility where your claim(s) arose have a grievance procedure?
	Yes
	□ No
	Do not know
C.	Does the grievance procedure at the jail, prison, or other correctional facility where your claim(s) arose cover some or all of your claims?
	Yes
	□ No
	Do not know
	If yes, which claim(s)?

D.	Did you file a grievance in the jail, prison, or other correctional facility where your claim(s) arose concerning the facts relating to this complaint?
	Yes
	□ No
	If no, did you file a grievance about the events described in this complaint at any other jail, prison, or other correctional facility?
	Yes
	No
E.	If you did file a grievance:
	1. Where did you file the grievance?
	Foothills Correctional
	2. What did you claim in your grievance? Staff Put me in a overflooded 8 how and they pulled me out in cuffs and I fell and hurt my back and Staff
	I fell and hurt my back and Staff aidnt assist me 3. What was the result, if any?
	none to me really but they fixed the shower
	4 What steps if any did you take to appeal that decision? Is the grievance process completed? If

not, explain why not. (Describe all efforts to appeal to the highest level of the grievance process.)

I wrote grievence went through all the steps, I wrote valieth and got the Findings and disposition in which they considered it resolved

VIII.

F.	Ify	ou did not file a grievance:
	1.	If there are any reasons why you did not file a grievance, state them here:
	2.	If you did not file a grievance but you did inform officials of your claim, state who you informed, when and how, and their response, if any:
G.		se set forth any additional information that is relevant to the exhaustion of your administrative edies.
•	٠.	
		e: You may attach as exhibits to this complaint any documents related to the exhaustion of your inistrative remedies.)
Previou	ıs Lav	vsuits
the filin brought maliciou	g fee i an act is, or i	ikes rule" bars a prisoner from bringing a civil action or an appeal in federal court without paying f that prisoner has "on three or more prior occasions, while incarcerated or detained in any facility, tion or appeal in a court of the United States that was dismissed on the grounds that it is frivolous, fails to state a claim upon which relief may be granted, unless the prisoner is under imminent ous physical injury." 28 U.S.C. § 1915(g).
To the b	est of	your knowledge, have you had a case dismissed based on this "three strikes rule"?
Yes	3	
No		
If yes, st	ate wl	nich court dismissed your case, when this occurred, and attach a copy of the order if possible.

A.		Have you filed other lawsuits in state or federal court dealing with the same facts involved in this action? Yes				
	V	No				
В.		your answer to A is yes, describe each lawsuit by answering questions 1 through 7 below. (If there is over than one lawsuit, describe the additional lawsuits on another page, using the same format.)				
	1.	Parties to the previous lawsuit				
		Plaintiff(s)				
		Defendant(s)				
	2.	Court (if federal court, name the district; if state court, name the county and State)				
	3.	Docket or index number				
	4.	. Name of Judge assigned to your case				
	5.	Approximate date of filing lawsuit				
	6.	Is the case still pending?				
		Yes				
		No .				
		If no, give the approximate date of disposition.				
	7.	What was the result of the case? (For example: Was the case dismissed? Was judgment entered in your favor? Was the case appealed?)				

Have you filed other lawsuits in state or federal court otherwise relating to the conditions of your C. imprisonment?

Pro Se	14 (Rev. 12	2/16) C	omplaint for Violation of Civil Rights (Prisoner)
			Yes
		V	No
	D.		your answer to C is yes, describe each lawsuit by answering questions 1 through 7 below. (If there is ore than one lawsuit, describe the additional lawsuits on another page, using the same format.)
		1.	Parties to the previous lawsuit
			Plaintiff(s)
			Defendant(s)
		2.	Court (if federal court, name the district; if state court, name the county and State)
		3.	Docket or index number
		4.	Name of Judge assigned to your case
		5.	Approximate date of filing lawsuit
		6.	Is the case still pending?
			Yes
			No
			If no, give the approximate date of disposition
			What was the result of the case? (For example: Was the case dismissed? Was judgment entered in your favor? Was the case appealed?)
		-	

IX. Certification and Closing

B.

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

A. For Parties Without an Attorney

I agree to provide the Clerk's Office with any changes to my address where case—related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Date of signing:	17			
Signature of Plaintiff	littleson John J			
Printed Name of Plaintiff	Printed Name of Plaintiff Ithe John Jontavius			
Prison Identification #	1451749			
Prison Address	5150 Western Au	5150 Western Ave		
	morgantown	NC	28655	
	City	State	Zip Code	
For Attorneys				
Date of signing:				
Signature of Attorney				
Printed Name of Attorney				
Bar Number				
Name of Law Firm				
Address				
	City	State	Zip Code	
Telephone Number				
E-mail Address	-			